FORM 3

1402021127

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

MEGET IN	1.31 PAGE 1 / 65
SECRETARY SECON	
14 APR 15 PM	14 10

			Offic	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Donnelly for Indiana				
ADDRESS (number and street)	1050 17th St, NW, Ste 590			
				<u> </u>
Check if different than previously reported. (ACC)	Washington		DC 20036	3
2. FEC IDENTIFICATION N	UMBER ▼CIT	ry 🏝	STATE A	ZIP CODE
C C00393652	3. IS THE REPO		AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Ch. (a) Quarterly Reports: April 15 Quarterly F July 15 Quarterly F October 15 Quarter January 31 Year-Er Termination Report	Report (Q1) Report (Q2) rly Report (Q3) Id Report (YE) (TER)	Primary (12P) Convention (12C) ion on Post-Election Report for the General (30G)	General (12G) Special (12S) Runoff (30R)	in the State of Special (30S) in the State of
5. Covering Period 0	01 / 2014	through 03	31 / 31	2014
I certify that I have examined th	is Report and to the best of	my knowledge and belief it is	true, correct and corr	nplete.
Type or Print Name of Treasure				
Signature of Treasurer Kath	erme Davis Kathern	ie L. Davis	Date 04	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.				
Office				
Use				EC FORM 3 Revised 02/2003)